Initial: 5/96

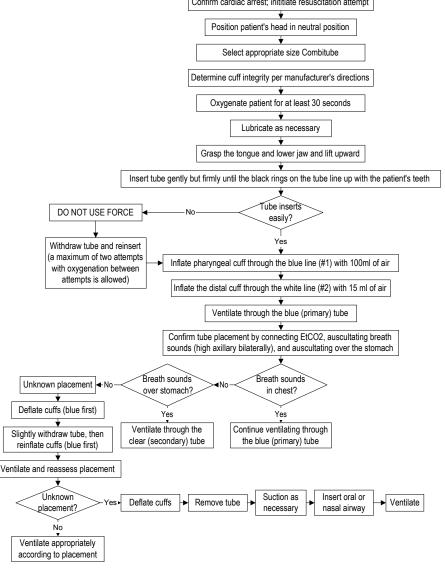
Reviewed/revised: 12/11/02

Revision: 3

MILWAUKEE COUNTY EMS PRACTICAL SKILL COMBITUBE AIRWAY

Approved by:	Ronald Pirrallo, MD, MHSA	
Signature:		
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Purpose:		Indications:	
To prevent regurgitation of stomach contents into the airway		Cardiac arrest, medical or traumatic	
To facilitate ventilation with a bag-valve mask			
To provide a secure airway			
Disadvantages:	Complications:	Contraindications:	
Gag reflex must be absent	Possible trauma to	Patients <5 feet in height for Combitube	
Patient must be unconscious	airway or esophagus	Patients < 4 feet in height for Combi SA	
Placement must be identified		Known esophageal disease or trauma	
(trachea or esophagus)		Intact gag reflex	
May need removal before		Caustic ingestion	
endotracheal intubation			
	Disadvantages: Gag reflex must be absent Patient must be unconscious Placement must be identified (trachea or esophagus) May need removal before	Disadvantages: Gag reflex must be absent Patient must be unconscious Placement must be identified (trachea or esophagus) May need removal before Cardiac arrest, medica Complications: Possible trauma to airway or esophagus	



NOTES:

When ventilating through the blue (primary) tube:

- The Combitube is placed in the esophagus when breath sounds are present bilaterally and epigastric sounds are absent.
 - The clear tube may be used for removal of gastric fluid or gas with the catheter provided in the airway kit.
- The Combitube is placed in the trachea when breath sounds are absent and epigastric sounds are present.
- The Combitube placement is unknown when both breath and epigastric sounds are absent.